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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Rely on Your Beliefs Fund 209 Pennsylvania Avenue, SE ADDRESS (number and street) Check if different than previously DC 20003 Washington reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00344648 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 0 1 0 1 2007 0 1 3 1 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Corinne A. Falencki Type or Print Name of Treasurer Electronically Filed by Corinne A. Falencki 02 20 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

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FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name Rely on Your Beliefs Fund [®] D " D 0 1 2007 0 1 2007 0 1 3 1 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 240493.94 2007 January 1 (b) Cash on Hand at 240493.94 Begining of Reporting Period 0.00 0.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 240493.94 240493.94 6(a) and 6(c) for Column B) 30221.45 30221.45 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 210272.49 210272.49 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name Rely on Your Beliefs Fund

Report Covering the Period:

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From:

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^Y 2007

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other | | |
| Than Political Committees | 0.00 | 0.00 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add | 0.00 | 0.00 |
| Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (h) Dalikiaal Barty Community | 0.00 | 0.00 |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines | | |
| 11(a)(iii),(b) and (c)) (Carry | 0.00 | 0.00 |
| Totals to Line 33, page 5) | 0.00 | 0.00 |
| 2. Transfers From Affiliated/Other | | |
| Party Committees | 0.00 | 0.00 |
| | 0.00 | 0.00 |
| 3. All Loans Received | 0.00 | 0.00 |
| 4. Loan Repayments Received | 0.00 | 0.00 |
| 5. Offsets To Operating Expenditures | | |
| (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| Refunds of Contributions Made to Federal candidates and Other | | |
| Political Committees | 0.00 | 0.00 |
| | | |
| 7. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| , , , | | |
| Transfers from Non-Federal and Levin Funds (a) Non-Federal Account | | |
| (from Schedule H3) | 0.00 | 0.00 |
| (| | |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| | | |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 9. Total Receipts (add Lines 11(d), | | |
| 12, 13, 14, 15, 16, 17, and 18(c)) | 0.00 | 0.00 |
| Total Federal Receipts | | |
| (subtract Line 18(c) from Line 19) | 0.00 | 0.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 14221.45 14221.45 Expenditures..... (c) Total Operating Expenditures 14221.45 14221.45 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 15000.00 15000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 1000.00 1000.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20))

- (a) Shared Federal Election Activity (from Schedule H6)
 - (i) Federal Share
- (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....
- 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..
- 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....

| 30221.45 | |
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30221.45

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| | III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|---|----------------------------|-----------------------------------|
| 33. | Total Contributions (other than loans) from Line 11(d), page 3) | 0.00 | 0.00 |
| 34. | Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. | Net Contributions (other than loans) (subtract Line 34 from Line 33) | 0.00 | 0.00 |
| 36. | Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 14221.45 | 14221.45 |
| 37. | Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. | Net Operating Expenditures (subtract Line 37 from Line 36) | 14221.45 | 14221.45 |

| | STILL BOLL B (I LOT OTHI 5X) | | erate schedule(s) | | -OR LIN check or | E NUMBE | R: | | PAG | E 6/18 | 8 |
|-----------|---|-------------------------------|---------------------------------|-------|---------------------|------------------|----------|----------|--------------|------------|----------------|
| IT | EMIZED DISBURSEMENTS | | category of the Summary Page | - 1 - | 21b 27 | 22 28a | 2 2 | 3 8b | 24 28c | 25 29 | 26 30b |
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| \ \ | NAME OF COMMITTEE (In Full) | ie and addres | ss or any political o | JOHIH | iillee lo s | Olicit Coriti | ibulioi | 15 11011 | II SUCII COI | IIIIIIIII | |
| \rangle | Rely on Your Beliefs Fund | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | '0220.E6 | 50 | |
| ٩. | UPS | | | | | | of Disb | | | V . V | V |
| | Mailing Address PO Box 72470244 | | | | | 0 1 | , | 0 5 | 5 / | ž 0 ŏ 7 | 7 ' |
| | City | State PA | Zip Code | | | Amou | int of E | ach D | Disburseme | ent this I | Period |
| | Philadelphia Purpose of Disbursement | PA | 19170-0001 | | _ | - Г | • | | | 186. | 43 |
| | PAC SHIPPING CHARGES | | | | | | | | | | |
| | Candidate Name | | | | egory/ ype | | | | | | |
| | Senate | ement For: Primary | General | | | PAC | SHIPI | PING | CHARG | ES | |
| | President State: District: | Other (spe | ecify) | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | Trans | action | 1D: 7 | 70220.E6 | .52 | |
| 3. | UPS | | | | | Date | of Disb | oursen | nent | 02 | |
| | Mailing Address PO Box 72470244 | | | | | 0 ^M 1 | M / | 0 5 | D / Y | ž 0 ŏ 7 | 7 ^Y |
| | City Philadelphia | State PA | Zip Code 19170-0001 | | | Amou | int of E | ach D | Disburseme | ent this f | Period |
| | Purpose of Disbursement | | | | - | T L. | | | | 134. | 67 |
| | PAC SHIPPING CHARGES Candidate Name | | | Cate | egory/ | | | | | | |
| | | | | | ype | | | | | | |
| | Senate President | ement For: Primary Other (spe | General cify) ▼ | | | PAC | SHIPI | PING | CHARG | ES | |
| | State: District: | | | | | | | | | | |
| Э. | Full Name (Last, First, Middle Initial) UPS | | | | | Date | of Disb | oursen | _ | | |
| | Mailing Address PO Box 72470244 | | | | | 0 ^M 1 | M / | 1 2 | 2 / Y | ž 0 ŏ 7 | 7 ^Y |
| | City Philadelphia | State PA | Zip Code 19170-0001 | | | Amou | int of E | ach D | Disburseme | ent this f | Period |
| | Purpose of Disbursement PAC SHIPPING EXPENSE | | | | | <u> </u> | | | | 25. | 09 |
| | Candidate Name | | | | egory/ ype | | | | | | |
| | Office Sought: Senate President State: Disburs Disburs | ement For: Primary Other (spe | General ecify) | | | PAC | SHIPI | PING | EXPEN | SE | |
| | out. | | | | | <u> </u> | | | | | |
| S | UBTOTAL of Disbursements This Page (optional) | | | | . • | <u> </u> | - | | • | 346. | 19 |
| T | OTAL This Period (last page this line number only |) | | | . • | L. | | | | | |

| | CHEDULE B (FEC FOIIII 3X) | OR LIN check or | E NUMBE | R: | L P | AGE | 7 / 18 | 3 | | |
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| IT | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | _ I — | 21b 27 | 22 28a | 23 28b | 24 280 | | 25 29 | 26 30b |
| | y Information copied from such Reports and Stater for commercial purposes, other than using the nam | | | | | | | | | 3 |
| \rangle | NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund | , , , , , , , , , , , , , , , , , , , | | | | | | | | |
| ۹. | Full Name (Last, First, Middle Initial) UPS Mailing Address PO Box 72470244 | | | | Date | of Disburs | | | 0 ŏ 7 | Y |
| | City | State 7in Code | | | A | | h Diaha | | alaia D | Navia d |
| | City Philadelphia | State Zip Code PA 19170-0001 | | | Amol | int of Eac | h Disburs | ement | tnis P | rerioa |
| | Purpose of Disbursement PAC SHIPPING EXPENSES | | | |] L. | | | | 82.8 | 37 |
| | Candidate Name | | | egory/ vpe | | | | | | |
| | Office Sought: House Senate President State: District: | ement For: Primary General Other (specify) | | | PAC | SHIPPIN | NG EXPI | ∃NSE | S | |
| 3. | Full Name (Last, First, Middle Initial) | | | | | |) : 70220. | .E664 | | |
| ٥. | Visa | | | | | of Disburs | | ΥΥ | Y | Υ |
| | Mailing Address PO Box 77042 | | | | 0 1 | | 05 | 2 | 0 ŏ 7 | |
| | City Madison | State Zip Code WI 53707-1042 | | | Amou | int of Eac | h Disburs | ement | this P | eriod |
| | Purpose of Disbursement CREDIT CARD CHARGES: SEE BELOW | | | | 1 L. | | | 2 | 342.2 | 28 |
| | Candidate Name | | | egory/ vpe | | | | | | |
| | Office Sought: Senate President State: Disburse Disburse | ement For: Primary General Other (specify) | | | CREI BELC | OIT CAR | RD CHAF | ≀GES | : SEE | Ī |
| _ | Full Name (Last, First, Middle Initial) | | | | | | D : 70220 | .E668 | 3 | |
| J. | Agent Fee | | | | | of Disburs | | Y Y | ν, | Y |
| | Mailing Address | | | | 1 1 | | 27 | 2 | 0 Ď 6 | |
| | City | State Zip Code | | | Amou | int of Eac | h Disburs | ement | this P | 'eriod |
| | Purpose of Disbursement PAC AIRFARE FEE EXPENSE | | | | T L. | | | | 25.0 | 00 |
| | Candidate Name | | | egory/ vpe | | | | | | |
| | Office Sought: House Senate President State: District: | ement For: Primary General Other (specify) | | | | I O ITEM D: PAC E | IJ AIRFAR | E FE | E EX | P- |
| S | UBTOTAL of Disbursements This Page (optional) | | | . • | | | | 24 | 125.1 | 5 |
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| \sum_{i} | NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund | to and address of any political | | |
| Α. | Full Name (Last, First, Middle Initial) American Air Mailing Address 4255 Amon Carter Blvd | # 2400 | | Transaction ID: 70220.E665 Date of Disbursement 1 1 2 7 2 0 0 6 |
| | | | | |
| | City Fort Worth | State Zip Code TX 76155-2603 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement PAC AIRFARE | | | 1538.61 |
| | Candidate Name | | Category/ Type | - [MEMO ITEM] |
| | Office Sought: Senate President State: Disburs Senate President | sement For: Primary General Other (specify) ▼ | | MEMO: PAC AIRFARE |
| — | Full Name (Last, First, Middle Initial) | | | Transaction ID: 70220.E667 |
| В. | Oceanaire Restaurant | | | Date of Disbursement |
| | Mailing Address 1201 F St NW | | | 12 D 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Washington | State Zip Code DC 20004-1217 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement PAC LUNCH MEETING | | | 200.00 |
| | Candidate Name | | Category/ Type | IMEMO ITEMI |
| | Office Sought: House Disburs Senate President State: District: | sement For: Primary General Other (specify) ▼ | | MEMO: PAC LUNCH MEETING |
| | Full Name (Last, First, Middle Initial) | | | Transaction ID: 70220.E671 |
| C. | Enterprise Rent-A- Car | | | Date of Disbursement |
| | Mailing Address 398 Meeting St | | | 111 D 25 Y 2006Y |
| | City Charleston | State Zip Code SC 29403-6233 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement PAC RENTAL CAR EXPENSE | | | 393.92 |
| | Candidate Name | | Category/ Type | - [MEMO ITEM] |
| | Office Sought: Senate President State: Disburs Senate President | sement For: Primary General Other (specify) ▼ | | MEMO: PAC RENTAL CAR EXPENSE |
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| \rangle | NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | Trans | action II | D : 70220 | .E681 | | |
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| | Mailing Address PO Box 77042 | | | | | 0 ^M 1 | M / D | 05 | ž | 0 ŏ 7 | Y |
| | City | State Zip Code | | | | Amou | nt of Eac | h Disburs | ement | this P | eriod |
| | Madison | WI 53707-1 | 042 | | | | • | • | - 0 | 073.2 | 7 |
| | Purpose of Disbursement CREDIT CARD CHARGES: SEE BELOW | | | | | | | | | .073.2 | 27 |
| | Candidate Name | | | Categor Type | y/ | | | | | | |
| | Senate President | sement For: Primary Gen Other (specify) | eral | | | CREE BELO | | RD CHAI | RGES | S: SEE | Ξ |
| | State: District: | | | | | | | | | | |
| В. | Full Name (Last, First, Middle Initial) GMD Technologies | | | | | Date o | of Disbur | | | | |
| | Mailing Address 3210 S 28th St Apt 302 | | | | | 1 1 | M / D | 30 / | ž | 0 Ď 6 | Y |
| | City Alexandria | State Zip Code VA 22302-1 | 326 | | | Amou | nt of Eac | h Disburs | | | - |
| | Purpose of Disbursement PAC TECHNOLOGY EXPENSE | | | | | | | | 1 | 576.6 | 64 |
| | Candidate Name | | | Category Type | y/ | rna e na | O ITEM | 1 1 | | | |
| | Senate President | sement For: Primary Gen Other (specify) ▼ | ieral | | | - | | TECHN | OLO | GY EX | KPE- |
| | State: District: | | | | | | | | | | |
| C. | Full Name (Last, First, Middle Initial) Washington Courier | | | | | Date o | of Disbur | | .E687 | 7 | |
| | Mailing Address 5520 Cherokee Ave Suite 120 | | | | | 1 ^M 2 | M / D | 07 | ž | 0 Ó 6 | Y |
| | City Alexandria | State Zip Code VA 22312-2 | | | | Amou | nt of Eac | h Disburs | ement | this P | eriod |
| | Purpose of Disbursement PAC COURIER EXPENSE | | | | | | | | | 35.2 | 22 |
| | Candidate Name | | | ategor Type | y/ | | O ITEN | •• | | | |
| | Office Sought: House Senate President State: District: | sement For: Primary Gen Other (specify) ▼ | eral | | | - | O ITEN D: Pac | ij COURII | ∃R EX | KPEN | SE |
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| $ \rangle$ | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | | |
| V | Rely on Your Beliefs Fund | | | | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) | | | | | | | | | _ | 220.E | 686 | | |
| ۸. | SCI*Stamps.com | | | | | | | _ | isburs | | nt / Y | ΥΥ | / ° Y | 1 |
| | Mailing Address 12959 Coral Tree PI | | | | | | 1 ^M 2 | | C | 7 | | ž 0 č | 6 | |
| | City | | ip Code 0066-7020 | | | | Amou | ınt o | f Each | n Disk | oursem | ent thi | s Per | iod |
| | Los Angeles Purpose of Disbursement | CA 9 | 0006-7020 | | _ | | | | | | | 1: | 5.99 | |
| | PAC POSTAGE EXPENSE | | | | | | | | | | | | | |
| | Candidate Name | | | | ate Ty | gory/ pe | [MEN | 10 1 | TENA | | | | | |
| | Senate President | sement For: Primary Other (specify | General | | | | MEM MEM | | - | | TAGE | EXP | ENS | E |
| _ | State: District: Full Name (Last, First, Middle Initial) | | | | | | T | | ID | 700 | 200 5 | 20.4 | | |
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| | Mailing Address 12959 Coral Tree PI | | | | | | 1 2 | М | ″ <u></u> 1 | 7 | ′ 🗀 | ž 0 č | 6 | |
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| | Purpose of Disbursement PAC POSTAGE EXENSE | | | | | | L. | | | | | 1: | 5.99 | |
| | Candidate Name | | | | ate Ty | gory/ pe | [MEN | 10 1 | TENA | | | | | |
| | Office Sought: House Disbur Senate President State: District: | sement For: Primary Other (specify | General 7) ▼ | | | | MEM MEM | | _ | • | TAGE | EXE | NSE | |
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| | Office Sought: House Disbur Senate President State: District: | Primary Other (specify | General | | | | MEM MEM | | | | TAGE | EXP | ENS | E |
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| or | for commercial purposes, other than using the nan | ne and address of any polit | ical con | nn | nittee | o solic | it contr | ribut | ions fr | om s | such c | comn | nittee | |
| $ \rangle$ | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | | |
| | Rely on Your Beliefs Fund | | | | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) | | | | | | | | on ID | _ | - | Ξ68 2 | 2 | |
| ٠ | SCI*Stamps.com | | | | | | М | of D | isburs | eme | nt / Ty | ′ Y | Υ | Υ |
| | Mailing Address 12959 Coral Tree Pl | | | | | | 1 1 | | | 2 1 | L | . 2 | o ŏ o | 5 |
| | City | State Zip Code CA 90066-70 | 20 | | | | Amou | ınt o | f Each | n Dis | burse | men | t this | Period |
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| | PAC POSTAGE EXPENSE | | | | | | | | | | | | | |
| | Candidate Name | | C | | egory/ ype | | FRA RA | ı | TE 1.4. | , | | | | |
| | Office Sought: Senate President State: Disburs Senate President | ement For: Primary Gener Other (specify) | al | | | | (MEM | | | _ | TAG | iE E | XPE | NSE |
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| В. | Columbia Books, Inc. | | | | | | | _ | isburs | | nt | , , , | | V |
| | Mailing Address 1825 Connecticut Ave N #625 | IW Ste 625 | | | | | 1 1 | М | / D3 | 3 0 | / L | ž | o ŏ e | 3 ^Y |
| | City Washington | State Zip Code DC 20009-57 | 33 | | | | Amou | ınt o | f Each | n Dis | burse | men | t this | Period |
| | Purpose of Disbursement PAC OFFICE MATERIALS EXPENSE | | | | | 7 | L. | | - | | | | 263. | 32 |
| | Candidate Name | | | | egory/ ype | | | 10.1 | T-14 | | | | | |
| | Senate President | ement For: Primary Gener Other (specify) ▼ | al | | | | MEM MEM EXPE | O: F | PAC (| | ICE I | MAT | ΓERI | ALS |
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| | Mailing Address PO Box 77042 | | | | | | 0 ^M 1 | М | [/] D | 5 5 | / Y | ž | 0 ŏ | 7 ^Y |
| | City Madison | State Zip Code WI 53707-10 | 42 | | | | Amou | ınt o | f Each | n Dis | burse | men | t this | Period |
| | Purpose of Disbursement CREDIT CARD CHARGES: SEE BELOW | | | | | 7 | | | _ | | | . 1 | 984. | 00 |
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| | Senate President | ement For: Primary Gener Other (specify) | al | | | | CREI BELC | | CARI | D CI | HAR | GES | S: SE | E |
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| $ \rangle$ | NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund | | | | | | | | | | | | | |
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| Α. | Full Name (Last, First, Middle Initial) | | | | | | | | | _ | 220.E | 672 | | |
| Α. | La Chaumiere | | | | | | | of D | isburs | _ D | nt / TY | Y | Y | Υ |
| | Mailing Address 2813 M St NW | | | | | | 11 | | 2 | 2 0 | Ĺ | 2 (| οŏε | 3 |
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| | Washington Purpose of Disbursement | DC | 20007-3712 | | | | | | | | | | 180.3 | 30 |
| | PAC DINNER EVENT | | | | | | | - | - | | | | | |
| | Candidate Name | | | | | gory/ | | | | | | | | |
| | Office Sought: House Disburs | sement For: | | | IУ | pe | [MEN | | | | | | | |
| | Senate Sought. | Primary | General | | | | MEM | O: F | PAC [| NIC | VER E | ΞVΕΙ | NT | |
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| | Senate | Primary | General | | | | IVIEIVI | O. r | AC I | 101 | | ^ | INOL | _ |
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| C. | The Ritz Carlton | | | | | | | | isburs | | | | | |
| | Mailing Address 4445 Willard Ave Ste 8 | 00 | | | | | ^M 2 | М | / D | 1 8 8 | / Y | ž | οŏε | S Y |
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| | NAME OF COMMITTEE (In Full) | | | | | | | | | | | | | | | |
| | Rely on Your Beliefs Fund | | | | | | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) | | | | | | | | | on ID | | | E67 | 6 | | |
| Λ. | The Ritz Carlton | | | | | | | | of Di м | isburs | - | nt / 🔼 | Y Y | , Y | Y | |
| | Mailing Address 4445 Willard Ave Ste 80 | 0 | | | | | | 11 | | 2 | 2 ^D | L | 2 | οŏ | 6 | |
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| | Office Sought: Senate President State: Disburse Disburse | ement For: Primary Other (sp | General pecify) ▼ | | | | | | | PAC I | - | ΓEL Ι | EXP | ENS | E | |
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| В. | The Ritz Carlton | | | | | | | Date o | | isburs | eme | | | | Y | |
| | Mailing Address 4445 Willard Ave Ste 80 | 0 | | | | | | 1 2 | | 1 | 18 | L | 2 | ΟĎ | 6 | |
| | City Chevy Chase | State MD | Zip Code 20815-3699 | | | | | Amou | nt o | f Each | n Dis | burse | emen | | Period | 7 |
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| | Mailing Address 4445 Willard Ave Ste 80 | 0 | | | | | | 1 1 | М | 2 | 2 7 | Ľ | ' <u>2</u> | οŏ | 6 ' | |
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| Α. | Full Name (Last, First, Middle Initial) The Ritz Carlton | | | | | Date of | ction I | seme | 220.E6 | 77 | |
| | Mailing Address 4445 Willard Ave Ste | 800 | | | | 12 | / [| 13 | / Y | ž 0 ŏ 6 | 3 |
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| | Purpose of Disbursement PAC HOTEL EXPENSE | | | | | <u> </u> | | | | 471. | 90 |
| | Candidate Name | | | С | ategory/ Type | [BAFBA/ | \ ITE& | 4 1 | | | |
| | Senate President | Primary Other (spec | General cify) ▼ | | | MEMC | | | EL EX | PENSE | Ξ |
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| В. | GMD Technologies | | | | | | Disbur | seme | | | Y |
| | Mailing Address 3210 S 28th St Apt 302 | | | | | 0 1 |] [| 1 2 | , L. | ž 0 ŏ 7 | 7 |
| | City Alexandria | State VA | Zip Code 22302-1326 | | | Amour | t of Ead | h Dis | burseme | | |
| | Purpose of Disbursement PAC TECHNOLOGY SERVICES Candidate Name | | | C | ategory/ Type | | | | | 429. | 33 |
| | Office Sought: House Disbute Senate President State: District: | Primary Other (spec | General cify) ▼ | | Турс | PAC T | ECHN | OLO | GY SE | RVICE | S |
| C. | Full Name (Last, First, Middle Initial) | | | | | | ction I | | 220.E6 | 30 | |
| | Mailing Address 303 Peachtree St NE Suite 5300 | | | | | 01 | / [| 29 | / Y | ž o ŏ 7 | 7 ^Y |
| | City Atlanta | State GA | Zip Code 30308-3265 | | | Amour | t of Ead | h Dis | burseme | | |
| | Purpose of Disbursement PAC LEGAL SERVICES | | | | | L. | | | | 1000. | 00 |
| | Candidate Name | | | С | ategory/ Type | | | | | | |
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| \ | NAME OF COMMITTEE (In Full) | | | | | | | | | | | |
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| ۸. | Lagana Printing | | | | | ate of I | Disburse | | v | V . | V | |
| | Mailing Address 513 C St NE | | | | | 0 1 " | [/] 2 | 9 ′ | 2 | 0 ŏ 7 | | |
| | City | State Zip Code DC 20002-5809 | | | Α | mount | of Each | Disburse | emen | t this F | erio | t |
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| | PAC PRINTING EXPENSES | | | | | | | | | - | - | _ |
| | Candidate Name | | | egory/ ype | | | | | | | | |
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| | Senate President | Primary General Other (specify) | | | | | | | | | | |
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| э. | Tiny Jewel Box | | | | | | Disburse | | / ° V | V | V | |
| | Mailing Address 1147 Connecticut Ave N 6th Floor | W FI 6 | | | | М 1 M | / _ 0 | 5 / | Ž | 0 ŏ 7 | Y | |
| | City Washington | State Zip Code DC 20036-4302 | | | Amount of Each Disbursement this Po | | | | | erio | t | |
| | Purpose of Disbursement PAC EVENT FAVORS EXPENSE | 20030 4002 | | | [| | | | 1 | 051.9 | 91 | |
| | Candidate Name | | | egory/ ype | | | | | | | | |
| | Senate President | ement For: Primary General Other (specify) | | | P | AC EV | 'ENT F | AVORS | EX | PENS | E | |
| | State: District: | | | | | | | | | | | |
|). | Full Name (Last, First, Middle Initial) Dan Williams | | | | | ate of I | Disburse | 70220. ement | | | | |
| | Mailing Address 209 Pennsylvania Ave S | E | | | 1 L | М 1 M | 0 | 5 / | ž | 0 Ď 7 | Y | |
| | City Washington | State Zip Code DC 20003-1107 | | | Α | mount | of Each | Disburse | emen | t this F | erio | t |
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| | PAC OFFICE EXPENSES Candidate Name | | | egory/ ype | | | | | | | | |
| | Office Sought: House Disburs | ement For: Primary General Other (specify) | | | P | AC OF | FICE | EXPEN | SES | | | |
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| 1 \ | NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund | | | | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) Dan Williams | | | | | Date o | | sburs | em | | | | Y | |
| 1 | Mailing Address 209 Pennsylvania Ave SE | | | | | | | 1 | 2 | | 2 | οŏ | 7 | |
| | City Washington | State DC | Zip Code 20003-1107 | | | Amoui | nt of | Each | ı D | isburse | men | - | | od |
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| | Candidate Name | | | Cate Ty | gory/ pe | | | | | | | | | |
| | Senate President | oursement For: Primary Other (spe | General ▼ | | | PAC | OFF | ICE | Ε> | (PENS | SES | | | |
| _ | State: District: | | | | | Date o | f Di | | em | | | | V | |
| Ī | Mailing Address 209 Pennsylvania Av | re SE | | | | 01 29 7 2007 | | | | | | 7 | | |
| | City Washington | State DC | Zip Code 20003-1107 | | | Amoui | nt of | Each | ı D | isburse | - | | | od |
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| | Candidate Name | | | Cate Ty | gory/ pe | | | | | | | | | |
| | Office Sought: House Disk Senate President State: District: | oursement For: Primary Other (spe | General ecify) ▼ | | | PAC | OFF | ICE | RE | ENT | | | | |

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| \ | NAME OF COMMITTEE (In Full) | | | |
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| | Full Name (Last, First, Middle Initial) | | | Transaction ID: 70220.E656 |
| ٩. | National Republican Congressional Cor | nm | | Date of Disbursement |
| | Mailing Address 320 1st St SE | | | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
| | City Washington | State Zip Code DC 20003-1838 | | Amount of Each Disbursement this Period |
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| | Candidate Name | | Category/ Type | |
| | Office Sought: House Disbu Senate President | xrsement For: 2008 X Primary General Other (specify) | | PAC 2 CONTR. |
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| $\overline{\ }$ | NAME OF COMMITTEE (In Full) | | | |
| | Rely on Your Beliefs Fund | | | |
| _ | Full Name (Last, First, Middle Initial) | | | Transaction ID: 70220.E662 |
| ۹. | Lupus Foundation of America, Inc. | | | Date of Disbursement |
| | Mailing Address 2000 L St NW Ste 710 Suite 710 | | | 01 29 7 2007 |
| | City | State Zip Code | | Amount of Each Disbursement this Period |
| | Washington | DC 20036-4916 | | 1000.00 |
| | Purpose of Disbursement PAC MEMORIAL DONATION | | | 1000.00 |
| | Candidate Name | | Category/ Type | |
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